DHW CONNECTION
A newsletter for the employees of the Idaho Department of Health & Welfare

HOW RISKY IS THIS ACTIVITY?

Idaho continues to report an increasing number of new cases of COVID-19. As we attempt to go about our daily lives, it's critical that we **stay home** when we're sick, **wear a face covering** in public, **keep six feet apart** from everyone else in public, and **wash or sanitize your hands** often as we work together to protect each other and stop the spread of COVID-19. As you consider your daily activities, here are four questions you can ask yourself to figure out how risky an activity is:

FOUR QUESTIONS TO ASK YOURSELF

1. WHO IS INVOLVED?

The fewer people involved, the lower your chances of getting or spreading COVID-19. The lowest risk activities involve only you and the people you live with.

2. WHERE WILL YOU BE?

Private spaces, like your home or backyard, carry the lowest risk. Outdoor activities that can be done away from crowds are less risky than activities that put you in close contact with others.

3. HOW CLOSE WILL YOU BE TO PEOPLE WHO ARE NOT MEMBERS OF YOUR HOUSEHOLD?

Activities that allow you to stay at least 6 feet away from people who are not members of your household are less risky than activities that don't allow for physical distancing.

4. HOW LONG WILL YOU BE AROUND PEOPLE WHO ARE NOT MEMBERS OF YOUR HOUSEHOLD?

Spending less time around people who are not members of your household is less risky than spending more time with them.

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KEY RESULTS FROM PROJECT FILTER'S SMOKING AND VAPING SURVEYS

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A FOCUS ON SAFETY IS A WIN FOR RECRUITMENT EFFORTS AT SWITC

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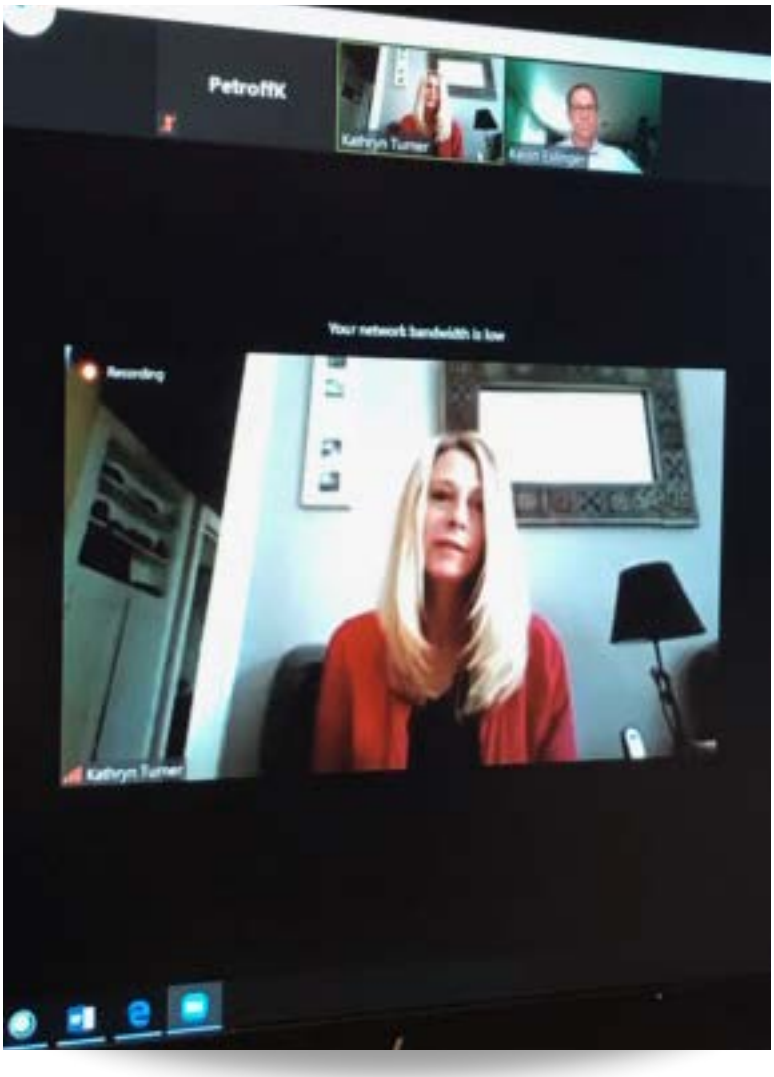
Dr. Kathy Turner participates in a Zoom interview with Brian Holmes of KTVB on Tuesday, July 21. Dr. Turner also answered COVID-19 data questions via Facebook Live on Wednesday, July 22.



DHW CONNECTION

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COVID-19:
THE LATEST UPDATES

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COVID-19: FACTS VS. FICTION

(Originally published on July 14 at dhwblog.com)

There is a lot of COVID-19 information available through social media and other communications channels. Some of it is helpful and factual, and some of it is opinion or speculation. And some is just plain false. We want to help you separate the COVID-19 facts from fiction as you navigate through this pandemic.

Is wearing a mask or cloth face covering really helpful? The evidence is clear -- cloth face coverings reduce the spread of COVID-19. They serve two purposes: to protect the public from those who may be infected with COVID-19 and to protect those infected with COVID-19 from spreading the disease to others.

Wearing a mask is most effective when everyone does it, and it also shows respect and concern for your neighbors and community. Masks are appropriate when physical distancing of at least six feet is not possible.

Cloth face coverings should not be placed on young children under the age of 2, anyone with difficulty breathing, anyone who is unconscious, incapacitated, or unable to remove the covering without assistance.

Does COVID-19 more severely affect older adults? Yes. According to the Centers for Disease Control and Prevention, as you get older, your risk for severe illness from COVID-19 increases. For example, people in their 50s are at higher risk for severe illness than people in their 40s. Similarly, people in their 60s or 70s are, in general, are at higher risk for severe illness than people in their 50s. The greatest risk for severe illness from COVID-19 is among those aged 85 or older.

There are also other factors that can increase your risk for severe illness, such as underlying medical conditions. By understanding the factors that put you at an increased risk, you can make decisions about what kind of precautions you should take in your daily life.

Is there an effective treatment for COVID-19? Currently, there's no medication approved to prevent or treat COVID-19. The experimental antiviral drug remdesivir received FDA approval to be used for severe cases. Researchers are testing several other treatments.

Will the summer heat kill the virus? Warmer outdoor temperatures probably won't make COVID-19 disappear. Scientists think the new coronavirus may be similar to the flu and colds. They cause less illness in warmer seasons, but they still circulate and make some people sick. It's also important to note that COVID-19 is circulating in countries with hot weather.

Is there a vaccine available to cure COVID-19? No, there is no vaccine for COVID-19 right now. Scientists are working diligently and hope to have one later this year.

How does Idaho count COVID-19 deaths? As you can see at coronavirus.idaho.gov (select the link below the blue boxes to get to the data dashboard), confirmed deaths include those who have died with positive PCR laboratory testing results (the polymerase chain reaction or PCR test is a laboratory technique). Probable deaths include decedents without a positive PCR lab test who either had 1. COVID-like illness and evidence of exposure to the virus or 2. the death certificate listed COVID-19 or SARS-CoV-2 as contributing to death.

Will a COVID-19 vaccine be mandatory for everyone when it becomes available? There is no COVID-19 vaccine at this time, but people should plan to work with their healthcare providers to determine whether they should get the vaccine. Vaccinations will be an individual's choice, as with all vaccinations in Idaho.

Resources

If you are looking for the latest and most accurate information on COVID-19, please visit the following websites:

CDC Coronavirus Disease Website

Idaho's Coronavirus Website

Idaho Rebounds Website

OVERVIEW OF KEY RESULTS FROM SMOKING AND VAPING STUDIES

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Submitted by Elizabeth Hoyt, Project Filter

Idahoans acknowledge that smoking is harmful to their health, but when it comes to vaping, their opinions vary, according to a recent online survey of 847 Idahoans. Project Filter, a program of the Department of Health and Welfare, created the survey to measure the attitudes and behaviors of adults 18 and older related to e-cigarettes and vaping.

Results related to cigarettes/e-cigarettes included:

- Idahoans believe vaping products are as addictive as cigarettes, but many also feel that e-cigarettes are less harmful than cigarettes. Those surveyed also feel that vaping products can help them quit tobacco products.
- The key reasons those surveyed use cigarettes and/or vaping products is to help them relax/deal with stress. They also noted that smoking is pleasurable, and they like the taste/flavors available for vaping.
- About half of those who smoke cigarettes have tried to quit (without success) or are planning to quit. Interest in quitting e-cigarettes and other tobacco products is much lower.
- The key reason Idahoans want to quit is to prevent health problems associated with smoking.
- Physicians and family members/friends are most likely to convince users of tobacco products to quit.
- Most of those surveyed say they do not pay attention to anti-smoking/vaping ads. Only 28 percent say ads make them want to quit using smoking/vaping products.

Results related to vaping included:

- Rural Idahoans surveyed are more likely to use vaping products every day. They also more likely than urban and suburban residents to use vaping products because they like the taste and to help them relax/deal with stress. Those surveyed in urban and suburban ares are more likely to use vaping products to help them quit smoking cigarettes.
- Rural residents are more likely than suburban/urban residents to believe that e-cigarettes are less harmful than cigarettes, and to believe that vaping is safe.
- Those surveyed in urban areas are more likely to trust non-profits and health/wellness websites for truthful information about vaping/vaping products, while rural Idahoans are more likely to trust social media or friends.

Things to note

- The survey noted that most of those who use vaping products are age 18-35.
- Gen Z Idahoans (born 1997-current) are less likely to have smoked cigarettes in the past year, but they are more likely to have used vaping products.
- Those with incomes $75K or more are more likely to have used smokeless tobacco products.
- The two youngest age groups, Gen Z and Gen X (born 1965-1980) are more likely to have used pipes in the past year compared to millennials (born 1981-1996) and boomers (born 1946-1964).
- Boomers are more likely to say they smoke more than a pack a day. They are also more likely to smoke in their homes and buy cigarettes by the carton.
- Males are more likely than females to smoke e-cigarettes multiple times a day. Those with the lowest incomes are more likely to say they vape more than 20 times day.
- Gen Z are much more likely to say they use vaping products when they are around others who are using these products; males are more likely than females to say they use vaping products in the evening when relaxing, after meals, and after work.
- Those with the lowest incomes are more likely to buy e-cigarettes at vape shops, while those with the highest income are more likely to buy vaping products at a tobacco shop. Gen Z is more likely to get their e-cigarettes/vaping products from a friend, while males are more likely than females to buy vaping products online.

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OVERVIEW OF KEY RESULTS FROM SMOKING AND VAPING STUDIES

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Nearly 70% of respondents have used cigarettes in the past year.

- More than one-half have used e-cigarettes, with lower usage of other tobacco products.

	Used in the Past Year	
	Cigarettes	68%
	Electronic Cigarettes	57%
	Cigars, little cigars, cigarillos, etc.	22%
	Pipes	13%
	Chewing tobacco	13%
	Smokeless tobacco	9%
	Dissolvable Products	7%

n=500

Q8. Which of the following tobacco or smoking products, if any, have you used in the past year?

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PROJECT FILTER
IDAHO FIGHTS TOBACCO®

DO YOU KNOW THE SIGNS OF ELDER ABUSE?

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Submitted by Chris Barrott, Region 5

DON'T IGNORE IT.
REPORT IT.
877-799-4430
https://medicaidcomplaints.dhw.idaho.gov

Statistics for abuse of the elderly are chilling:

- Only 1 in 24 cases of elder abuse are reported.
- More than 2 million cases of elder abuse are reported each year on average across the nation. That is estimated to be only 4 percent of all abuse, neglect and exploitation of the elderly in the country.
- 1 out of 10 elderly people will be abused in any given month.
- Elders who experience a form of abuse, even if not severe, have a reported 300 percent higher risk of early death.

The Bureau of Long Term Care (BLTC) in the Division of Medicaid is working to close the gap on the large number of unreported cases of abuse, neglect, and exploitation of the elderly. The bureau is working closely with its federal partners at the Centers for Medicare and Medicaid Services and with Idaho Adult Protection and local law enforcement agencies to reduce and report abuse of the elderly in Idaho.

What can you do?

Pay attention to the warning signs of elder abuse which may include:

- Unexplained withdrawal from normal activities.
- Frequent arguments with a caregiver.
- Sudden changes in finances.
- Bedsores, poor hygiene, unusual weight loss.
- Belittling or threatening behavior by a caregiver.
- Depression or confusion.
- Trouble sleeping.

All community members are urged to report all suspected incidents of elder abuse to local law enforcement and Adult Protection. Report complaints at 877-799-4430 or medicaidcomplaints.dhw.idaho.gov.

A plan of action

The bureau received funding from the Idaho Home Choice Money Follows the Person Grant to develop innovative solutions to address the issues of elder abuse. They developed a three-phase plan that included free training on how to recognize and prevent elder abuse for everyone who wants to take it. It is also available in the DHW Learning Hub, and more than 100 DHW employees have voluntarily taken the training.

For the second phase, the bureau partnered with Home Delivered Meals providers to provide an informational postcard to more than 5,000 elderly and disabled participants in June that defined abuse and offered resources for help. Community partners joined the campaign and shared flyers, brochures, and other materials.

In the third phase, 19 billboards were erected across the state starting July 13 to help bring awareness to the importance of Elder Abuse Prevention. The billboards will be up for 30 days, in the following locations http://view.lamar.com/viewer/5ef3b14d8117170f7b718182. The bureau also continues to provide posters and brochures to community members, businesses, and advocates. The materials are available at local Medicaid offices as well as for free at https://healthandwelfare.idaho.gov/Medical/Medicaid/LongTermCare/ProviderResources/tabid/4652/Default.aspx?QuestionID=754&AFMID=18352

For more information on how you can help prevent elder abuse, please contact Chris Barrott at Chris.Barrott@dhw.idaho.gov.

SHARING OUR COVID-19 MESSAGING ON SOCIAL MEDIA

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The department continues to ramp up communications efforts on DHW social media channels. Our social media following continues to grow, and we now have nearly 23,000 followers on Facebook, Twitter, Instagram, and LinkedIn. With so many Idahoans engaging with us through social media, it's an important tool for the department's messaging. **Remember that following and sharing the department's messages externally will help the people of Idaho get accurate and up-to-date information.**

For the week of July 20 (in addition to our regular blog and daily numbers posts), we were focused on sharing the #MaskUpIdaho messaging.

The department hosts a Facebook LIVE event every Wednesday at 10 a.m., where our experts answer questions for DHW followers. In the broadcast on Wednesday, July 15, Division Administrator Elke Shaw-Tulloch answered questions submitted by our followers. On Wednesday, July 22, Dr. Kathy Turner explained information on our data dashboard.

June 16 – July 17 Facebook and Twitter analytics

Twitter

- 482,000 Impressions
- 13,500 Profile visits
- 4,536 Total Followers

Facebook

- 11,532 Page views
- 101,641 Reach
- 58,832 Post engagement
- 15,373 Followers
- 6,659 Likes

IDAHO RANKS #1 IN THE NATION FOR SNAP CASEWORK

Written by: Gretchan Heller, Self-Reliance

The Idaho Supplemental Nutrition Assistance Program (also known as SNAP or Food Stamps) has once again ranked number one in the nation for accuracy on casework in SFY2019. Idaho Self-Reliance staff processed SNAP applications with the lowest errors out of all US states. Idaho came in with the lowest error amount at 1.25 percent, while the national average was 7.36 percent. For several years, Idaho's SNAP program has outperformed other states with their accuracy and timeliness, showcasing the knowledgeable Self-Reliance staff and their commitment to building strong families through healthy food and nutrition.

While the USDA measures SNAP on accuracy, it's important to give a shout-out to the timeliness that the Self-Reliance Benefits program provides to customers as well. Seventy percent of SNAP applications are processed same day. For the others, there is a two-day turnaround, which is still incredibly fast for customers to get their SNAP benefits. This success is even more impressive when we think about the increased workload for staff and the increasing need for customer benefits, due to COVID-19.

In previous years, the Food and Nutrition Service (FNS) had doled out performance bonuses for top states, which allowed the SNAP program to make further improvements. However, FNS will not be distributing bonuses this time around. And although the program won't see a bonus this year, that doesn't discourage the SR Benefits workers from continuing to strive for excellence and accuracy. It is from the devotion of knowledgeable Self-Reliance staff and their attention to timeliness, accuracy, same day service goals, and welcoming constant improvements, that they can continue providing Idahoans with the best level of service they can.

Everyone in the Division of Self-Reliance is a part of this sustained success. Field staff and program managers are major contributors to these efforts, as they work directly with customers, process the applications, and get customers the benefits they need. There is also an incredible group of people working to support policy initiatives, waivers, automation, communication, and program development. The state quality control team has been instrumental in ensuring Idaho meets quality standards for timeliness and accuracy, providing feedback to our programs and operations as they identify opportunities for improvement. The commitment, ingenuity, and high-quality work from everyone ensures that Idaho remains at the top for program performance.

Serving thousands of Idahoans each month around the state with accuracy and timeliness ensures families have healthy and nutritious food on their table when they need it most. This is an incredible showcase of when we all work together with a shared mission, dedicated to strengthening the health, safety, and independence of Idahoans, we can continue to have one of the best models for SNAP administration in the country, and bring together resources for living a nutritious and healthy lifestyle in Idaho.

OUR LIVING STRATEGIC PLAN: 2021-2025

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Written by Lori Gilbert, Nina Dillon, and Brad McDonald, Division of Management Services

What a wild ride the past year has been. On July 1, 2019, the Department of Health and Welfare (DHW) published its four-year Strategic Plan (2020 – 2024) and committed to specific objectives and tasks carefully and meticulously planned. DHW used all the information available at the time to create a roadmap that would enable us to make the best use of our resources in helping Idahoans live their best lives.

And then, you-know-what happened. To say DHW hit a "roadblock" would be an understatement. In many areas of our lives, all bets were off: We had no choice but to cancel plans and change our working and living situations. Many of us had lives that became unrecognizable in many ways.

However, some things didn't change. The work continued. And rather than abandoning DHW's strategic goals, we could see that in fact, they mattered more than ever. The importance of the mission to help Idahoans continued in crystal-clear focus.

DHW uses the Strategic Plan as a tool to reach a mutual understanding of where the department is going, and we will get there by working together with mutual purpose. We are on the right track last year and will keep heading toward the same destination. This is why in the new 2021-2025 Strategic Plan, DHW commits to continue working toward the same four goals pledged in our previous Strategic Plan:

GOAL 1 Ensure affordable, available healthcare that works

GOAL 2 Protect children, youth, and vulnerable adults

GOAL 3 Help Idahoans become as healthy and self-sufficient as possible

GOAL 4 Strengthen the public's trust and confidence in the Department of Health and Welfare

The Strategic Plan is not a document that sits on a shelf until it is time for the annual update. Throughout the year, the director, deputy directors, division administrators, Human Resources, the Office of Communications, and hospital administrators (called the Strategic Workgroup) meet weekly to discuss the progress made toward goals. Keep an eye out this coming year for updates on our progress.

The Strategic Workgroup also talks about big ideas for the journey in the years to come, which will help all of us improve both processes and the customer experience. Each member of the workgroup brings knowledge to the table and discusses the issues facing their teams. Ultimately, the work of every single DHW employee is represented at some point in the plan. And, the plan as a whole propels the mission, which is at the core of all of our work.

Please take some time to familiarize yourself with our strategic plan and encourage your colleagues and friends to also have a look. It encompasses the work done every day by dedicated staff throughout the department and focuses on the innovations and big ideas we all will be turning into reality over the next four years. The strategic plan is one of the most useful tools in keeping the public and the Legislature updated on DHW's progress. Leadership invites you, and all Idahoans, to follow us on our collective journey.

OUR MISSION

Dedicated to strengthening the health, safety, and independence of Idahoans.

OUR VISION

Provide leadership for a sustainable, integrated health and human services system.

OUR VALUES

Integrity, high quality customer service, and compassion are the foundation for all department activities. A focus on these values will lead to success.

FOCUSING ON SAFETY HELPS RECRUITMENT EFFORTS AT SWITC

Submitted by Cameron Gilliland, FACS

For the past six months, the data is telling the safety story for the Southwest Idaho Treatment Center (SWITC). Leadership has been focused on keeping our employees safe, and it shows:

- Staff time lost due to injury is down 67 percent
- Claims of injury due to clients are down 39.2 percent
- Paid time out due to injury is down 86.4 percent
- Client assaultive behaviors down 17.6 percent

This dramatic change is thanks to a comprehensive effort by all staff at SWITC, according to Jamie Newton, SWITC Administrator. Jamie notes a strong correlation of two factors that likely played a significant role in these statistics: more effective staff recruitment and the creation of the Behavior Response Team.

In December 2019, Linda Wood, Training and Recruiting Specialist, has made hiring the right employees for SWITC her mission. She knows it takes a full staff, focused on the same things, to move the dial.

"In the past six months, we have seen very few days when we were scrambling to fill shifts because our employees were calling in sick or becoming injured on the job. Linda has helped by recruiting and selecting employees that stay at SWITC."

According to Jamie, as staff numbers increased, SWITC then had the opportunity to create the Behavior Response Team. This team currently consists of six staff members who focus on de-escalating behaviors, crisis support, and preventing injuries at SWITC. This team is not assigned to oversee specific clients, as are other staff at SWITC, but they support staff members by intervening to de-escalate behaviors.

According to Geoff Putnam, Developmental Disabilities Program Manager at SWITC, the Behavior Response Team members were selected based on their ability to calm crisis situations that have potential for dangerous escalation. Behavior Response Team members focus on supporting clients through crisis situations while maintaining the safety of staff and clients. The current members of the SWITC Behavior Response Team are: Jason Murray, Grayson Travis, Lindsay Moore, Michael Garcia, Sarah Howell, and Tim Lareau.

In addition to their commitment and disposition to do this work, Behavior Response Team members also are given advanced training in behaviors and non-violent crisis intervention. This additional training them methods to address both verbal and physical incidents.

As part of their training, Behavior Response Team members are becoming certified as Registered Behavioral Technicians. This international certification involves both classwork and supervision by Board Certified Applied Behavioral Analysts.

SWITC has five Board Certified Behavioral Analysts (BCBA): Geoff Putnam, Mallori Warren, Alare Kerstetter, Kristen Martin, and Keith Berger. As the Behavior Response Team becomes certified, this training and certification will become available to more staff at SWITC.

The Behavioral Response team has been so successful that SWITC is looking to increase the size of the team to in the next few months to ensure coverage at all shifts and buildings.

SWITC has made great strides in increasing clinical expertise at both the professional and paraprofessional levels. This effort is paying off in a safer facility for both clients and staff.

DIRECTOR'S Update
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COVID-19 is not going away any time soon. It is troubling that our case counts are increasing in Idaho, and in other places across the United States. What it means is that we must continue to be diligent and follow recommended precautions. As employees of DHW, we have an opportunity to set an example, to influence the behavior of others and, ultimately, protect ourselves, our families, and our communities.

Thanks to the hard work of our Human Resources team and the Division of Public Health, we have many COVID-19 resources to help you keep yourself, and others, safe from the spread of COVID-19.

On InsideDHW, in the Working Through COVID-19: DHW Employee Resources section, you can find a lot of helpful information including:

- DHW Phase-In Plan
- Local Government Orders
- Communications and Guidance
- Polices and Forms
- Frequently Asked Questions

The information you will find on InsideDHW, the coronavirus website, the Idaho Rebounds website, the Centers for Disease Control and Prevention website is information that is accurate and timely. There is a lot of misinformation in the public, so please use trusted resources when you are looking for COVID-19 facts. In this issue of the DHW Connection, you can read DHW's Facts vs. Fiction blog on Page 3, which should also help you when you get questions from your families and neighbors.

Thank you for the work are doing to help Idahoans live their best lives. I appreciate you.

Dave Jeppesen,
Director

IN THE NEWS

COVID-19

- **Healthcare leaders urge Idahoans to wear face coverings (July 14):** The presidents and CEOs of St. Luke's, Saint Alphonsus, Primary Health, West Valley Medical Center, Saltzer Health and more gathered for a press conference Tuesday morning to urge a statewide mask mandate and strict attendance to preventive measures as COVID-19 swells in Idaho. The health care leaders pleaded for a statewide mask mandate — something over 20 states have done — saying it's the best way to slow a rapid increase in COVID-19 cases, and also urged residents to push local and state leaders for mandates.
- **"Changing horses mid-stream' (July 15):** The U.S. Department of Health and Human Services is now requiring that data be reported to its private database instead of a public database run by the Centers for Disease Control. Dr. Hahn called that decision disappointing, and said it was akin to changing horses in the middle of a stream.
- **HHS requires hospital to send data to them, rather than CDC (July 16):** The Trump administration issued a directive the week of July 13 that will make it difficult for Idaho to keep track of how many COVID-19 patients are hospitalized around the state and how many hospital beds, ICU beds and ventilators are available. "This new directive was issued abruptly and presents some significant challenges for Idaho to continue to monitor the number of hospitalizations in the state," Idaho Department of Health and Welfare spokesperson Niki Forbing-Orr said. Health and Welfare, and the U.S. Centers for Disease Control and Prevention, both were publishing daily counts of Idaho hospital patients with known or suspected COVID-19.
- **IDOC inmates test positive for COVID (July 17):** Idaho Department of Corrections has tested 1,686 incarcerated people. At the time of testing, IDOC found 846 negative, 129 pending, 61 positive with symptoms, 633 asymptomatic positive, and 17 have become inactive. Combined, that means 694 inmates actively have coronavirus. Additionally, 8 staff have tested positive but 2 people had previously been diagnosed and quarantined, so IDOC identified 6 new cases in its update. The department has 74 staff off of work, as of Thursday (July 16), due to coronavirus.
- **COVID-19 cases surge (July 16):** Idaho set a grim new record for new coronavirus infections in a single day today, according to the Idaho Department of Health & Welfare, with 727 more cases statewide, including 295 in Ada County and 274 in Canyon County. The state also reported seven new deaths.
- **St. Luke's nurse dies from COVID-19 (July 13):** A nurse practitioner with St. Luke's Children's Pediatrics in Caldwell died Monday from complications related to COVID-19. Samantha Hickey has been a healthcare provider for 15 years in Canyon County.
- **HHS unveils new public coronavirus system (July 20):** The Trump administration has restored public access to coronavirus data reported by hospitals to the federal government, after an outcry over missing data and controversy over a change in the agency that collects it. The information is now being published on the Department of Health and Human Services' (HHS) site, HHS Protect, instead of the Centers for Disease Control and Prevention's (CDC) National Healthcare Safety Network.
- **Many more people have had Covid-19 than what's showing up in official numbers, new CDC data reveals (July 21):** The number of people who have had Covid-19 was much greater than the official case count, according to data and a new analysis released by the US Centers for Disease Control and Prevention. But the country is far from a level that would give the population herd immunity. Depending on the region, the number of people infected was sometimes six to 24 times the number of reported cases, the CDC team said.
- **Idaho lawmakers seek options for calling special sessions (July 21):** Lawmakers concerned that Republican Gov. Brad Little has too much power following his emergency declaration because of the coronavirus pandemic considered on Monday ways to reconvene after the regular legislative session has ended.
- **We are not trying to take away your freedoms': Surgeon general makes urgent mask plea (July 20):** Surgeon General Jerome Adams on Monday implored Americans to wear masks to slow the spread of the coronavirus and acknowledged he was wrong to discourage the use of face coverings in the early days of the pandemic.

IN THE NEWS

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COVID-19 CONTINUED

- **Health board approves mandatory mask order for southeastern Idaho (July 21):** The Eastern Idaho Public Health board voted unanimously Tuesday approving an order to move Bonneville County into the moderate risk category; which mandates the use of masks in the County for the next 14 days.
- **Testing delays once again hamper COVID-19 response (July 22):** Surging COVID-19 outbreaks in several states are straining testing capacity across the country as people wait several days or even weeks to get their results back, causing another setback to the U.S. response to the months-long pandemic. Lengthy turnaround times are undermining the fight against the coronavirus, experts say, making efforts to trace contacts of confirmed cases almost pointless. That, in turn, potentially leads to more infections that threaten to strain testing capacity further.
- **FEMA head: 'We have a ways to go' on having enough PPE (July 22):** The head of the Federal Emergency Management Agency (FEMA) told Congress on Wednesday the country has "a ways to go" on getting enough protective equipment for health workers fighting coronavirus, though he said the situation has been improving.
- **Idaho to consider millions more in federal COVID-19 aid for schools (July 22):** State officials are looking to put another $31 million in federal CARES Act coronavirus aid into public schools in anticipation of a fall reopening, including $21 million for COVID-19 testing of Idaho school teachers and staff and $10 million for personal protective equipment.
- **Idaho appears to have failed Stage 4 for a third time — and for a new reason this time (July 22):** Idaho has failed to meet the criteria to exit Stage 4 for a third time, according to an analysis of data published by the Idaho Department of Health and Welfare.
- **WinCo to start requiring face masks on Friday (July 22):** WinCo announced on Facebook that it will start requiring face masks in stores starting Friday.
- **40% of Idahoans are not financially stable, report concludes (July 23):** Many people are struggling to make ends meet from the pandemic, but there is a staggering number of people in Idaho who were struggling even before the coronavirus.

OTHER

- **West Nile Virus in Canyon County (July 16):** West Nile virus was found in mosquitoes Tuesday in Canyon County. According to the Southwest District Health, the mosquitoes were found northeast of Caldwell. The area has been treated for both larval and adult stage mosquitoes. The Canyon County Mosquito Abatement District says it will step up surveillance and control measures to decrease any public threat.
- **Medicaid waivers on hold (July 16):** Two hotly debated waivers to make changes to Idaho's Medicaid program are in limbo due to the coronavirus pandemic. Last fall, the state sent the federal Centers for Medicare and Medicaid Services two proposed waivers in October 2019, one to add work requirements for Medicaid expansion beneficiaries and one to require most Medicaid patients to get a referral before seeking family planning services from anyone other than their primary doctor. Both are still pending.
- **Federal judges hear arguments on transgender sports, birth certificate laws (July 22):** Lawyers for the state of Idaho were in federal court Wednesday defending two new laws that, opponents say, discriminate against transgender people. Wednesday morning, lawyers for both sides appeared before Chief U.S. District Judge David Nye to defend House Bill 500, or the Fairness in Women's Sports Act, which bars transgender girls and women from playing on female high school and college sports teams. That afternoon, U.S. Magistrate Judge Candy Dale heard arguments on House Bill 509, or the Idaho Vital Statistics Act, which sets limited criteria to amend a birth certificate and requires a court order to do so, effectively barring transgender people from changing their sex on their birth certificates to match their gender identities under most circumstances.

"IN THE NEWS" are featured snippets compiled from Idaho news sources, including the Idaho Press, KTVB, Idaho Statesman, Times-News, Post-Register, Lewiston-Tribune, East Idaho News, and more.